

January 1, 2012 Management Employees Benefit Summary

Contract Information for Management Employees	City Manager	City Attorney	Fremont Association of Management Employees (FAME non-safety)	Fremont Association of Management Employees (FAME safety)	Fremont Police Manangement Association (FPMA)	Unrepresented Fremont Officials (UFO) - Department Heads & other at-will employees	Unrepresented Management Employees (UME)
Contract Date	N/A	N/A	07/01/11-06/30/13	07/01/11-06/30/13	07/01/11-06/30/13	N/A	N/A
Most Recent COLA Increase	6/22/08 - 4%	6/22/08 - 4%	6/22/08 - 4%	6/22/08 - 4%	6/22/08 - 4%	6/22/08 - 4%	6/22/08 - 4%
Next COLA Increase	To be determined	To be determined	To be negotiated	To be negotiated	To be negotiated	To be determined	To be determined
Previous COLA Increase	06/22/08- 4%	06/22/08- 4%	06/22/08- 4%	06/22/08- 4%	06/22/08- 4%	06/22/08- 4%	06/22/08- 4%
2011-2012 MOU Concessions	07/17/11-06/30/12 Employee paid Employer CalPers Contrib.- 5.29%	07/17/11-06/30/12 Employee paid Employer CalPers Contrib.- 5.29%	08/14/11-06/30/12 Employee paid Employer CalPers Contrib- 5.75%	08/14/11-06/30/12 Employee paid Employer CalPers Contrib- 6.30%	09/25/11-06/30/12 Employee paid Employer CalPers Contrib.- 6.43%	07/17/11-06/30/12 Employee paid Employer CalPers Contrib.- 5.29%	07/17/11-06/30/12 Employee paid Employer CalPers Contrib.- 5.29%
2012-2013 MOU Concessions	07/01/12-06/30/13 Employee paid Employer CalPers Contrib- 5.29%	07/01/12-06/30/13 Employee paid Employer CalPers Contrib- 5.29%	07/01/12-06/30/13 Employee paid Employer CalPers Contrib- 5.29%	07/01/12-06/30/13 Employee paid Employer CalPers Contrib- 5.80%	07/01/12-06/30/13 Employee paid Employer CalPers Contrib.- 5.8%	07/01/12-06/30/13 Employee paid Employer CalPers Contrib- 5.29%	07/01/12-06/30/13 Employee paid Employer CalPers Contrib- 5.29%
PERS Retirement For Employees hired on or before 12/31/2011	2.5% @ 55	2.5% @ 55	2.5% @ 55	3% @ 50	3% @ 50	2.5% @ 55	2.5% @ 55
Final Comp.	Single Highest Year	Single Highest Year	Single Highest Year	Single Highest Year	Single Highest Year	Single Highest Year	Single Highest Year
Survivor Benefit	4th Level	4th Level	4th Level	4th Level	4th Level	4th Level	4th Level
PERS Retirement for Employees hired after 12/31/11	2.0 % @ 60	2.0 % @ 60	2.0 % @ 60	3.0% @ 55	3.0% @ 55	2.0 % @ 60	2.0 % @ 60
Final Comp.	Three Highest Years	Three Highest Years	Three Highest Years	Three Highest Years	Three Highest Years	Three Highest Years	Three Highest Years
Survivor Benefit	4th Level	4th Level	4th Level	4th Level	4th Level	4th Level	4th Level
Employer Rate FY 11/12 (off set as outlined above)	22.916%	22.916%	22.916%	36.358%	36.358%	22.916%	22.916%
Employer Rate FY 12/13 (off set as outlined above)	23.611%	23.611%	23.611%	36.804%	36.804%	23.611%	23.611%
CalPers Employee Contribution	8%- Employee Contribution	8%- Employee Contribution	8%- Employee Contribution	9%- Employee Contribution	9%- Employee Contribution	8%- Employee Contribution	8%- Employee Contribution
Deferred Compensation	Annual City Contribution - \$5,400	Annual City Contribution - maximum allowable	Voluntary - employee paid	Voluntary - employee paid	Voluntary - employee paid	Annual City Contribution - Amount to be determined at time of hire based on approval of City Manager	Voluntary - employee paid
City Contribution to 401 (a)	2% of base salary + \$11,344 annually	3.4% of base salary	2% of base salary	N/A	N/A	2% of base salary	2% of base salary

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Car Allowance	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Uniform Allowance	N/A	N/A	Fire Non-Safety Managers \$1,000 annually	Police Mgmt - \$1,500 Fire Mgmt - \$1,000 annually	\$1,500 annually	Police Chief - \$1,500 annually; Fire Chief \$1,000 annually	N/A
Longevity Pay	N/A	N/A	N/A	24 yrs = add'l 2.3% of base pay	24 yrs = add'l 2.3% of base pay	N/A	N/A
Acting Pay	N/A	N/A	Amount is discretionary, based on level of duties performed and the duration of time performed. Criteria: Shall be for a period which exceeds at least 3 consecutive wks; duties assumed shall be substantive in scope and content.	Amount is discretionary, based on level of duties performed and the duration of time performed. Criteria: Shall be for a period which exceeds at least 3 consecutive wks; duties assumed shall be substantive in scope and content.	Amount is discretionary, based on level of duties performed and the duration of time performed. Criteria: Shall be for a period which exceeds at least 3 consecutive wks; duties assumed shall be substantive in scope and content.	City Manager discretion	Assignment exceeding 3 weeks - discretionary premium pay
Management Incentive Pay	N/A	N/A	City Manager discretion - premium pay for working outside normal scope of duties	City Manager discretion - premium pay for working outside normal scope of duties	City Manager discretion - premium pay for working outside normal scope of duties	City Manager discretion	City Manager discretion - premium pay for working outside normal scope of duties
Tuition Reimbursement	N/A	N/A	Maximum \$20,000 per EE with at least six months of full-time service; bargaining unit maximum \$150,000 for term of MOU	Maximum \$20,000 per EE with at least six months of full-time service; bargaining unit maximum \$150,000 for term of MOU	Maximum \$20,000 per EE with at least six months of full-time service; bargaining unit maximum \$150,000 for term of MOU	City Manager discretion	City Manager discretion

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City Paid Health Benefits Allowance (HBA) Excess HBA over premium cost paid as taxable ABC cash (cafeteria plan)	01/01/11 - HBA \$1,670.13/mo. Used to cover medical, dental, and vision premium. ABC cash cap- \$580/mo	01/01/11 - HBA \$1,670.13/mo. Used to cover medical, dental, and vision premium. No ABC cash issued	01/01/11 - HBA \$1,670.13/mo. Used to cover medical, dental, and vision premium. ABC Cash Cap- \$580/mo Employee hired as of 01/01/08: Employees who waive medical and dental receive \$780/mo If difference between HBA and medical/dental prem is \geq \$580 but $<$ \$780, will receive \$580/mo If difference between HBA and medical/dental prem is $<$ \$580, will receive amount not used for purchase of benefits. Employees hired after 01/01/08: Eligible for a maximum of \$580/mo ABC Cash if waiving or purchasing medical and dental premiums. Effective 06/30/13: Maximum ABC Cash received will be \$580/mo regardless of date of hire.	01/01/11 - HBA \$1,670.13/mo. Used to cover medical, dental, and vision premium. ABC Cash Cap: \$580/mo Employees hired as of 01/01/08: Ees who waive medical and dental receive \$780/mo. If the difference between HBA and medical/dental prem is \geq \$580 but $<$ \$780, will receive \$580/mo If difference between HBA and medical/dental prem is $<$ \$580, will receive amount not used for purchase of benefits. Employees hired after 01/01/08: Eligible for a maximum of \$580/mo ABC Cash if waiving or purchasing medical and dental premiums. Effective 06/30/13: Maximum ABC Cash received will be \$580/mo regardless of date of hire.	01/01/11 - HBA \$1,670.13/mo. Used to cover medical, dental, and vision premium. ABC Cash Cap: \$580/mo Employees hired as of 01/01/08: Ees who waive medical and dental receive \$780/mo If difference between HBA and medical/dental prem is \geq \$580 but $<$ \$780, will receive \$580/mo. If difference between HBA and medical/dental prem is $<$ \$580, will receive amount not used for purchase of benefits. Employees hired after 01/01/08: Eligible for a maximum of \$580/mo ABC Cash if waiving or purchasing medical and dental premiums. Effective 06/30/13: Maximum ABC Cash received will be \$580/mo regardless of date of hire.	01/01/11 - HBA \$1,670.13/mo. Used to cover medical, dental, and vision premium. ABC Cash Cap- \$580/mo	01/01/11 - HBA \$1,670.13/mo. Used to cover medical, dental, and vision premium. ABC Cash Cap- \$580/mo

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Dental Plan - premiums effective 01/01/11 Voluntary enrollment	EE = \$49.60/mo EE + 1 = \$93.22/mo Family = \$160.44/mo Covergag provided by Delta Dental	EE = \$49.60/mo EE + 1 = \$93.22/mo Family = \$160.44/mo Covergag provided by Delta Dental	EE = \$49.60/mo EE + 1 = \$93.22/mo Family = \$160.44/mo Covergag provided by Delta Dental	EE = \$49.60/mo EE + 1 = \$93.22/mo Family = \$160.44/mo Covergag provided by Delta Dental	EE = \$49.60/mo EE + 1 = \$93.22/mo Family = \$160.44/mo Covergag provided by Delta Dental	EE = \$49.60/mo EE + 1 = \$93.22/mo Family = \$160.44/mo Covergag provided by Delta Dental	EE = \$49.60/mo EE + 1 = \$93.22/mo Family = \$160.44/mo Covergag provided by Delta Dental
Vision Plan (VSP) - premiums effective 01/01/11 Voluntary Enrollment	Two vision plans available under VSP: Standard: EE = \$8.16 EE + 1 = \$11.62/mo Family = \$ 20.48/mo High: EE = \$11.80/mo EE + 1= \$17.04/mo Family = \$30.20/mo	Two vision plans available under VSP: Standard: EE = \$8.16 EE + 1 = \$11.62/mo Family = \$ 20.48/mo High: EE = \$11.80/mo EE + 1= \$17.04/mo Family = \$30.20/mo	Two vision plans available under VSP: Standard: EE = \$8.16 EE + 1 = \$11.62/mo Family = \$ 20.48/mo High: EE = \$11.80/mo EE + 1= \$17.04/mo Family = \$30.20/mo	Two vision plans available under VSP: Standard: EE = \$8.16 EE + 1 = \$11.62/mo Family = \$ 20.48/mo High: EE = \$11.80/mo EE + 1= \$17.04/mo Family = \$30.20/mo	Two vision plans available under VSP: Standard: EE = \$8.16 EE + 1 = \$11.62/mo Family = \$ 20.48/mo High: EE = \$11.80/mo EE + 1= \$17.04/mo Family = \$30.20/mo	Two vision plans available under VSP: Standard: EE = \$8.16 EE + 1 = \$11.62/mo Family = \$ 20.48/mo High: EE = \$11.80/mo EE + 1= \$17.04/mo Family = \$30.20/mo	Two vision plans available under VSP: Standard: EE = \$8.16 EE + 1 = \$11.62/mo Family = \$ 20.48/mo High: EE = \$11.80/mo EE + 1= \$17.04/mo Family = \$30.20/mo
Employee Assistance Plan City Paid - premium effective 01/01/10	\$4.52/mo	\$4.52/mo	\$4.52/mo	\$4.52/mo	\$4.52/mo	\$4.52/mo	\$4.52/mo
City Paid Life Insurance- premium effective 1/1/06	\$250,000 Coverage \$21.00/mo \$1,500 Dependent Cov \$0.36/mo	\$250,000 Coverage \$21.00/mo \$1,500 Dependent Cov \$0.36/mo	\$100,000 Coverage \$8.40/mo \$1,500 Dependent Cov \$0.36/mo	\$100,000 Coverage \$8.40/mo \$1,500 Dependent Cov \$0.36/mo	\$100,000 Coverage \$8.40/mo \$1,500 Dependent Cov \$0.36/mo	\$100,000 Coverage \$8.40/mo \$1,500 Dependent Cov \$0.36/mo	\$100,000 Coverage \$8.40/mo \$1,500 Dependent Cov \$0.36/mo
Supplmental Life Insurance - Voluntary \$10,000 to \$300,000 Employee, Spouse & Family coverage available	Employee paid; premium varies by volume & type of coverage	Employee paid; premium varies by volume & type of coverage	Employee paid; premium varies by volume & type of coverage	Employee paid; premium varies by volume & type of coverage	Employee paid; premium varies by volume & type of coverage	Employee paid; premium varies by volume & type of coverage	Employee paid; premium varies by volume & type of coverage

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AD&D Insurance - Voluntary. Employee, Spouse, and Family coverage available	Employee paid, premium varies by volume & type of coverage	Employee paid, premium varies by volume & type of coverage	Employee paid, premium varies by volume & type of coverage	Employee paid, premium varies by volume & type of coverage	Employee paid, premium varies by volume & type of coverage	Employee paid, premium varies by volume & type of coverage	Employee paid, premium varies by volume & type of coverage
Short Term Disability	Voluntary enrollment. After tax deduction. Maximum insurable salary \$15K/mo. Calculated as 66.67% of EE's monthly salary to maximum benefit of \$10K/mo. Premium is \$0.21/per \$100 of base salary.	Voluntary enrollment. After tax deduction. Maximum insurable salary \$15K/mo. Calculated as 66.67% of EE's monthly salary to maximum benefit of \$10K/mo. Premium is \$0.21/per \$100 of base salary.	Voluntary enrollment. After tax deduction. Maximum insurable salary \$15K/mo. Calculated as 66.67% of EE's monthly salary to maximum benefit of \$10K/mo. Premium is \$0.21/per \$100 of base salary.	Voluntary enrollment. After tax deduction. Maximum insurable salary \$15K/mo. Calculated as 66.67% of EE's monthly salary to maximum benefit of \$10K/mo. Premium is \$0.21/per \$100 of base salary.	Voluntary enrollment. After tax deduction. Maximum insurable salary \$15K/mo. Calculated as 66.67% of EE's monthly salary to maximum benefit of \$10K/mo. Premium is \$0.21/per \$100 of base salary.	Voluntary enrollment. After tax deduction. Maximum insurable salary \$15K/mo. Calculated as 66.67% of EE's monthly salary to maximum benefit of \$10K/mo. Premium is \$0.21/per \$100 of base salary.	Voluntary enrollment. After tax deduction. Maximum insurable salary \$15K/mo. Calculated as 66.67% of EE's monthly salary to maximum benefit of \$10K/mo. Premium is \$0.21/per \$100 of base salary.
Long Term Disability Insurance - premium effective 1/1/10	Employer Paid. Maximum insurable salary shall be \$15K/mo. Calculated as 66.67% of EE's monthly salary to a maximum benefit of \$10K/mo.	Employer Paid. Maximum insurable salary shall be \$15K/mo. Calculated as 66.67% of EE's monthly salary to a maximum benefit of \$10K/mo.	Employer Paid. Maximum insurable salary shall be \$15K/mo. Calculated as 66.67% of EE's monthly salary to a maximum benefit of \$10K/mo.	Employer Paid. Maximum insurable salary shall be \$15K/mo. Calculated as 66.67% of EE's monthly salary to a maximum benefit of \$10K/mo.	Employer Paid. Maximum insurable salary shall be \$15K/mo. Calculated as 66.67% of EE's monthly salary to a maximum benefit of \$10K/mo.	Employer Paid. Maximum insurable salary shall be \$15K/mo. Calculated as 66.67% of EE's monthly salary to a maximum benefit of \$10K/mo.	Employer Paid. Maximum insurable salary shall be \$15K/mo. Calculated as 66.67% of EE's monthly salary to a maximum benefit of \$10K/mo.

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Retiree Medical Reimbursement amount varies by MOU. Retirees can continue in City plan or utilize other plan and still receive reimbursement	<u>Retired prior to 7/1/99</u> Varies by retire date & yrs of service.	<u>Retired prior to 7/1/99</u> Varies by retire date & yrs of service.	<u>Retired prior to 7/1/99</u> Varies by retire date & yrs of service.	<u>Retired prior to 7/1/99</u> Varies by retire date & yrs of service.	<u>Retired prior to 7/1/99</u> Varies by retire date & yrs of service.	<u>Retired prior to 7/1/99</u> Varies by Retire date & yrs of service.	<u>Retired prior to 7/1/99</u> Varies by retire date & yrs of service.
	<u>Retired on or after 7/1/99</u> 0-9 yrs = \$200/mo 10-19 yrs = \$225/mo 20-29 yrs = \$250/mo 30+ yrs = \$275/mo	<u>Retired on or after 7/1/99</u> 0-9 yrs = \$200/mo 10-19 yrs = \$225/mo 20-29 yrs = \$250/mo 30+ yrs = \$275/mo	<u>Retired on or after 7/1/99</u> 0-9 yrs = \$200/mo 10-19 yrs = \$225/mo 20-29 yrs = \$250/mo 30+ yrs = \$275/mo	<u>Retired on or after 7/1/99</u> 0-9 yrs = \$200/mo 10-19 yrs = \$225/mo 20-29 yrs = \$250/mo 30+ yrs = \$275/mo	<u>Retired on or after 7/1/99</u> 0-9 yrs = \$200/mo 10-19 yrs = \$225/mo 20-29 yrs = \$250/mo 30+ yrs = \$275/mo	<u>Retired on or after 7/1/99</u> 0-9 yrs = \$200/mo 10-19 yrs = \$225/mo 20-29 yrs = \$250/mo 30+ yrs = \$275/mo	<u>Retired on or after 7/1/99</u> 0-9 yrs = \$200/mo 10-19 yrs = \$225/mo 20-29 yrs = \$250/mo 30+ yrs = \$275/mo
	<u>Retired on or after 07/01/01 with 20+ yrs of service =</u> Kaiser single prem rate on date of retirement.	<u>Retired on or after 07/01/01 with 20+ yrs of service =</u> Kaiser single prem rate on date of retirement.	<u>Retired on or after 07/01/01 with 20+ yrs of service =</u> Kaiser single prem rate on date of retirement.	<u>Retired on or after 07/01/01 with 20+ yrs of service =</u> Kaiser single prem rate on date of retirement.	<u>Retired on or after 07/01/01 with 20+ yrs of service =</u> Kaiser single prem rate on date of retirement.	<u>Retired on or after 07/01/01 with 20+ yrs of service =</u> Kaiser single prem rate on date of retirement.	<u>Retired on or after 07/01/01 with 20+ yrs of service =</u> Kaiser single prem rate on date of retirement.
	<u>Retired on or after 07/01/01 with 25+ yrs of service =</u> Kaiser two party prem rate on date of retirement.	<u>Retired on or after 07/01/01 with 25+ yrs of service =</u> Kaiser two party prem rate on date of retirement.	<u>Retired on or after 07/01/01 with 25+ yrs of service =</u> Kaiser two party prem rate on date of retirement.	<u>Retired on or after 07/01/01 with 25+ yrs of service =</u> Kaiser two party prem rate on date of retirement.	<u>Retired on or after 07/01/01 with 25+ yrs of service =</u> Kaiser two party prem rate on date of retirement.	<u>Retired on or after 07/01/01 with 25+ yrs of service =</u> Kaiser two party prem rate on date of retirement.	<u>Retired on or after 07/01/01 with 25+ yrs of service =</u> Kaiser two party prem rate on date of retirement.
	<u>Hired on or after 07/01/07</u> 0-5 yrs = \$0 6-9 yrs = \$200/mo 10-19 yrs = \$225/mo 20-24 yrs = Kaiser single prem rate on date of retirement. 25+ yrs = Kaiser two party prem rate on date of retirement. (See MOU for details)	<u>Hired on or after 07/01/07</u> 0-5 yrs = \$0 6-9 yrs = \$200/mo 10-19 yrs = \$225/mo 20-24 yrs = Kaiser single prem rate on date of retirement. 25+ yrs = Kaiser two party prem rate on date of retirement. (See MOU for details)	<u>Hired on or after 07/01/07</u> 0-5 yrs = \$0 6-9 yrs = \$200/mo 10-19 yrs = \$225/mo 20-24 yrs = Kaiser single prem rate on date of retirement. 25+ yrs = Kaiser two party prem rate on date of retirement. (See MOU for details)	<u>Hired on or after 07/01/07</u> 0-5 yrs = \$0 6-9 yrs = \$200/mo 10-19 yrs = \$225/mo 20-24 yrs = Kaiser single prem rate on date of retirement. 25+ yrs = Kaiser two party prem rate on date of retirement. (See MOU for details)	<u>Hired on or after 07/01/07</u> 0-5 yrs = \$0 6-9 yrs = \$200/mo 10-19 yrs = \$225/mo 20-24 yrs = Kaiser single prem rate on date of retirement. 25+ yrs = Kaiser two party prem rate on date of retirement. (See MOU for details)	<u>Hired on or after 07/01/07</u> 0-5 yrs = \$0 6-9 yrs = \$200/mo 10-19 yrs = \$225/mo 20-24 yrs = Kaiser single prem rate on date of retirement. 25+ yrs = Kaiser two party prem rate on date of retirement. (See MOU for details)	<u>Hired on or after 07/01/07</u> 0-5 yrs = \$0 6-9 yrs = \$200/mo 10-19 yrs = \$225/mo 20-24 yrs = Kaiser single prem rate on date of retirement. 25+ yrs = Kaiser two party prem rate on date of retirement. (See MOU for details)

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Retiree Medical Reimbursement amount varies by MOU. Retirees can continue in City plan or utilize other plan and still receive reimbursement	Provides credit for up to 10 years of service with other public agencies	Provides credit for up to 10 years of service with other public agencies	Provides credit for up to 10 years of service with other public agencies	Provides credit for up to 10 years of service with other public agencies	<u>Hired on or after 01/01/12</u> <u>Eligible for retiree medical premium reimbursement provided they meet the following criteria:</u> 1.) Retires from the City of Fremont within 120 days of separation 2.) Is vested with CalPers 3.) Has completed at least five (5) year of continuous service with the City 4.) Is at least age 50 or has received a CalPers industrial disability as a result of employment with the City of Fremont. The actual amount of medical premium reimbursement the City will contribute to eligible employees will be based on the employee's total years of City service as provided below: 0-5 yrs = \$0 6-24 yrs = \$10/mo per yrs of service 25+ = \$500/mo Provides credit for up to 10 years of service with other public agencies	Provides credit for up to 10 years of service with other public agencies	Provides credit for up to 10 years of service with other public agencies

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Annual General Leave (General Leave Hours accrue based on years of service in place of Vacation & Sick Leave Hours)	188 hrs	204 hrs	0 - 5 yrs = 128 hrs 6 -10 yrs = 152 hrs 11 -15 = 164 hrs 16+ = 188 hrs	0 - 5 yrs = 108 hrs 6 - 15 yrs = 132 hrs 16+ = 156 hrs	0 - 5 yrs = 108 hrs 6 - 15 yrs = 132 hrs 16+ = 156 hrs	0 - 5 yrs = 128 hrs 6 -10 yrs = 152 hrs 11 -15 = 164 hrs 16+ = 188 hrs	0 - 5 yrs = 128 hrs 6 -10 yrs = 152 hrs 11 -15 = 164 hrs 16+ = 188 hrs
Maximum General Leave Accruals (Excess hours roll over to a sick leave bank)	None	None	0-5 yrs = 315 hrs 6-10 yrs = 351 hrs 11-15 yrs = 387 hrs 16+ = 423 hrs	0-5 yrs = 315 hrs 6-10 yrs = 351 hrs 11-15 = 387 hrs 16+ = 423	0-5 yrs = 315 hrs 6-10 yrs = 351 hrs 11-15 = 387 hrs 16+ = 423	0-5 yrs = 315 hrs 6-10 yrs = 351 hrs 11-15 = 387 hrs 16+ = 423	0-5 yrs = 315 hrs 6-10 yrs = 351 hrs 11-15 = 387 hrs 16+ = 423
Leave liquidation program	N/A	Quarterly pay out of all hours over 250	See FAME MOU	See FAME MOU	See MOU	See FAME MOU	See FAME MOU
Management Leave (Non-accruable annual use or lose)	116 hours	116 hours	Based on yrs of service 0 - 10yrs = 104 hrs 11+ yrs = 116 hrs	Based on yrs of service 0 - 10yrs = 80 hrs 11 - 24 yrs = 104 hrs 24+ yrs = 56 hrs	Based on yrs of service 0 - 10yrs = 80 hrs 11 - 24 yrs = 104 hrs 24+ yrs = 56 hrs	Based on yrs of service 0 - 10yrs = 104 hrs 11+ yrs = 116 hrs	Based on yrs of service 0 - 10yrs = 104 hrs 11+ yrs = 116 hrs
Floating Holiday (Non-accruable annual use or lose)	N/A	N/A	8 hours	8 hours (if not used, added to holiday bank)	8 hours (if not used, added to holiday bank)	8 hours	8 hours
Holidays - Annual	12 days paid	12 days paid	12 days paid	104 hrs with pay out option (See MOU for details)	104 hrs with pay out option (See MOU for details)	12 days paid	12 days paid
Bereavement Leave	3 days	3 days	3 days	3 days	3 days	3 days	3 days
Personal Emergency Leave Bank	Employee leave donation pool. Review MOU for details	Employee leave donation pool. Review MOU for details	Employee leave donation pool. Review MOU for details	Employee leave donation pool. Review MOU for details	Employee leave donation pool. Review MOU for details	Employee leave donation pool. Review MOU for details	Employee leave donation pool. Review MOU for details
Union Dues	N/A	N/A	\$15.00/month	\$15.00/month	\$110.78/month	N/A	N/A

Note: The Human Resources Department has prepared this Benefit Summary for use as a reference tool for staff and other agencies. The information has been compiled using current MOU information and is only a brief summary of benefits. Please see the MOU's for specifics. MOU's are posted on the City's Intranet and Internet sites. The UFO's (Unrepresented Fremont Officials - at will employees) and UME's (Unrepresented Management Employees) do not have MOUs; however many of their benefits are similar to those of the FAME bargaining unit and some benefits are established by employment contract or the City Manager.